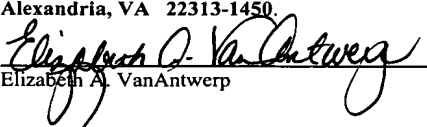




Application Number	10/803,176	<b>CERTIFICATE OF MAILING UNDER 37 CFR§1.8(a)</b>  I hereby certify that this correspondence is being deposited with the United States Postal Service on <i>April 27, 2004</i> as first class mail addressed to:  <b>Mail Stop Missing Parts</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>   Elizabeth A. VanAntwerp
Filing Date	March 17, 2004	
First Named Inventor	Shoji YOKOI	
Art Unit		
Examiner Name		
Confirmation No.	Not Assigned	
Attorney Docket No.	811_044	

Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**COMPLETION OF FILING  
REQUIREMENTS — NONPROVISIONAL APPLICATION**

Sir:

1. ☐ This replies to the Notice to File Missing Parts of Nonprovisional Application mailed \_\_\_\_\_  
☐ A copy of the Notice to File Missing Parts of Nonprovisional Application—Filing Date Grated is enclosed.
2. **Declaration or Oath**  
☒ No Declaration or Oath was filed. Enclosed is the original Declaration or Oath for this application.
3. **Transmittal of English Translation of Non-English Language Papers**  
☐ Submitted herewith is an English translation of the non-English language application papers as originally filed. Also submitted herewith is a statement by the translator of the accuracy of the translation. It is requested that this translation be used as the copy for examination purposes in the PTO.  
  
The English translation of the non-English language application consists of:  
  
☐ Page(s) Translation Statement  
☐ Page(s) of Specification  
☐ Page(s) of Claims  
☐ Page(s) of Abstract  
☐ Sheets of Formal Drawings
4. **Other Papers Enclosed**  
☐ A Preliminary Amendment  
☒ An Assignment and Assignment Transmittal  
☐ A Submission of Certified Copy of Priority Document  
☐ A Certified Copy of:  
☒ An Information Disclosure Statement  
☒ Form PTO-1449  
☒ Copies of IDS Citations

04/30/2004 HALL 1 00000015 10803176  
01 FC:1001 770.00 DP  
02 FC:1201 86.00 DP  
03 FC:1051 130.00 DP

<b>5. The filing fee has been calculated as shown below:</b>					
<b>Basic Filing Fee</b> (37 CFR §1.16(a))					\$ 770.00
<b>CLAIMS</b>	<b>Number Filed</b>	<b>NUMBER EXTRA</b>		<b>RATE</b>	
Total Claims	4- 20 =	0	x	\$ 18.00	
Indep. Claims	4- 3 =	1	x	\$ 86.00	\$ 86.00
<b>MULTIPLE DEPENDENT CLAIM(S)</b> (if applicable)			+	\$ 290.00	
<b>6. Surcharge Fees</b> (37 CFR §1.16(e)) <input checked="" type="checkbox"/> late payment of filing fee and/or <input checked="" type="checkbox"/> late filing of original declaration or oath					\$ 130.00
<b>7. Extension of Time</b> a. <input checked="" type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time. <b>OR</b> b. <input type="checkbox"/> Applicant petitions for an extension of time, the fees for which are set out in 37 CFR §1.17(a)(1)-(4), for the total number of months checked below: <input type="checkbox"/> One Month (37 CFR 1.17(a)(1)) . . . . . \$ 110.00 <input type="checkbox"/> Two Months (37 CFR 1.17(a)(2)) . . . . . \$ 420.00 <input type="checkbox"/> Three Months (37 CFR 1.17(a)(3)) . . . . . \$ 950.00 <input type="checkbox"/> Four Months (37 CFR 1.17(a)(4)) . . . . . \$1,480.00					
<b>TOTAL OF ABOVE CALCULATIONS =</b>					\$ 986.00
<b>8. Small Entity Status</b> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR §1.27. The fees indicated above are reduced by 1/2.					
<b>SUBTOTAL OF ABOVE CALCULATIONS =</b>					\$ 986.00
<input type="checkbox"/> Fee for processing an application filed with a specification in a non-English language (37 CFR §1.17(i) and §1.52(d))					
<input checked="" type="checkbox"/> Assignment Fee (37 CFR §1.21(h))					\$ 40.00
<b>TOTAL FEES DUE =</b>					\$ 1,026.00
<b>9. Payment of Fees and Authorization to Charge Additional Fees or Credit Overpayment</b> <input checked="" type="checkbox"/> A check in the amount of <b>\$1,026.00</b> is enclosed. <input type="checkbox"/> Charge Deposit Account 50-1446 in the amount of \$_____. Enclosed is a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 50-1446: a. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.16. b. <input checked="" type="checkbox"/> Fees required under 37 CFR 1.17.					
<b>Submitted By:</b>					
Name	Stephen P. Burr	Reg. No.	32,970	Customer No.	025191
Signature		Telephone No.	(315) 233-8300	Facsimile No.	(315) 233-8320
		Date	April 27, 2004		